

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

| | | | | |
|---|------|--------------------------|---------------------|---------|
| <i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i> FEE TRANSMITTAL For FY 2009 | | Complete If Known | | |
| | | Application Number | 10/516,600 | |
| | | Filing Date | August 8, 2005 | |
| | | First Named Inventor | AURIO, Nicolas | |
| | | Examiner Name | KOSAR, Aaron J. | |
| | | Art Unit | 1651 | |
| TOTAL AMOUNT OF PAYMENT | (\$) | 208.00 | Attorney Docket No. | 8491-US |

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 50-4498 Deposit Account Name: Nestle Nutrition

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments
 under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> | | <u>SEARCH FEES</u> | | <u>EXAMINATION FEES</u> | | <u>Fees Paid (\$)</u> |
|-------------------------|--------------------|---------------------|--------------------|---------------------|-------------------------|---------------------|-----------------------|
| | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Small Entity</u> | |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | _____ |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | _____ |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | _____ |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | _____ |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | _____ |

2. EXCESS CLAIM FEESFee DescriptionEach claim over 20 (including Reissues) Fee (\$) Fee (\$)Each independent claim over 3 (including Reissues) Fee (\$) Fee (\$)Multiple dependent claims Fee (\$) Fee (\$)

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | | |
|---------------------|---------------------|-----------------|---------------------------------------|----------------------------------|--|--|
| | - 20 or HP = | <u>4</u> | <u>x</u> <u>52.00</u> = <u>208.00</u> | | | |

HP = highest number of total claims paid for, if greater than 20.

| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | | |
|----------------------|---------------------|-----------------|----------------------|----------------------------------|--|--|
| | - 3 or HP = | <u> </u> | <u> </u> | | | |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

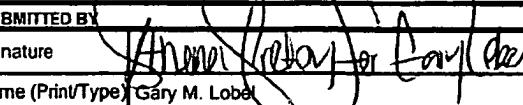
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|
| _____ | - 100 = _____ | / 50 = _____ (round up to a whole number) | | = _____ |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Fees Paid (\$)

| | | | |
|---------------------|---|---|--------------------------------------|
| SUBMITTED BY | | Registration No. (Attorney/Agent) <u>51,155</u> | Telephone <u>973-593-7500</u> |
| Signature |  | Name (Print/Type) <u>Gary M. Lobe</u> Date <u>July 16, 2009</u> | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: AURIO, Nicolas et al.

Confirmation No.: 7126

Application No.: 10/516,600

Group Art Unit: 1651

Filing Date: August 8, 2005

Examiner: KOSAR, Aaron J.

For: COMPOSITION COMPRISING VISCOUS
FIBERS AND VISCOSITY-LOWERING
PROTEINS

Attorney Docket No.: 8491-US

MAIL STOP AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

SUPPLEMENTAL AMENDMENT AND REPLY UNDER 37 C.F.R. §1.116

Sir:

In response to the Office Action mailed on January 26, 2009 and the Notice of Non-Compliant Amendment mailed on July 13, 2009, Applicant submits the following amendments and remarks for reconsideration and entry into the above-identified application.

Amendments to the Claims appear herein starting on page 2.

Remarks in support of the patentability of the claims appear herein beginning on page 7.